Case 1-15-41236-ess Doc 16 Filed 04/24/15 Entered 04/24/15 15:41:15

B6B (Official Form 6B) (12/07)

In re Lancelot A. Gambis, Patricia Gambis

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	on Hand	J	20.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		necking Account unt No. XXXX9233	Н	6,021.75
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	Used Comp	Furniture (Beds, Livingroom Furniture, TV, uter)	J	700.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	Used	Clothing	J	250.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issuer.	x			
				Sub-Tota	al > 6,991.75

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

Case 1-15-41236-ess Doc 16 Filed 04/24/15 Entered 04/24/15 15:41:15

B6B (Official Form 6B) (12/07) - Cont.

In re Lancelot A. Gambis, **Patricia Gambis**

Case No.	15-41236	

Debtors

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N Description an E	nd Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	The Education Plan - Coll	lege Savings Account	Н	19,768.00
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	x			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	x			
14.	Interests in partnerships or joint ventures. Itemize.	x			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	x			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	2014 Income Tax Refund		J	9,439.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
			(Tot	Sub-Tota	al > 29,207.00

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to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Lancelot A. Gambis, Patricia Gambis

Case No.	15-41236	

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	19	998 Land Rover Discovery - Good Condition	Н	2,277.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total >
(Total of this page)
Total >

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

2,277.00

38,475.75

Fill in this information t	to identify your case:	
Debtor 1	Lancelot A. Gambis	
Debtor 2 (Spouse, if filing)	Patricia Gambis	_
United States Bankrup	otcy Court for the: EASTERN DISTRICT OF NEW YORK	
Case number (If known)	-41236	Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter
Official Form	B 6I	13 income as of the following date:

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Debtor 1

Employed

☐ Not employed

Investigation

Federal Bureau of

23rd, 26 Federal Plaza

Describe Employment Fill in your employment

information.

Part 2:

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

New York, NY 10278

How long employed there?

Over 5 Years

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay. 3.
- Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

Debtor 2 or non-filing spouse

Employed

■ Not employed

Self Employed

7,513.20 0.00

3. 808.00 8,321.20

0.00

0.00

fficial Form B 6I	Schedule I: Your Income	page 1
ficial Form B 6I	Schedule I: Your Income	pag

For Debtor 1	Debt Debt		Lancelot A. Gambis Patricia Gambis	_	Cas	se number (<i>if known</i>)	15-412	36	
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of selections fund fund loans 5d. Required repayments of selections fund fund fund fund fund fund fund fund					F				
5.5. Tax, Medicare, and Social Security deductions 5.6. \$ 0.00 \$ 0.00		Cop	by line 4 here	4.	\$	8,321.20	\$	0.00	
55. Mandatory contributions for retirement plans 55. Voluntary contributions for retirement plans 55. Sequired repayments of retirement fund loans 56. Required repayments of retirement fund loans 57. Domestic support obligations 58. Insurance 59. Sequired repayments of retirement fund loans 59. Union dues 59. Union dues 59. Union dues 50. Union dues 50	5.	List	all payroll deductions:						
56. Insurance 57. Domestic support obligations 58. Union dues 59. Union dues 59. Union dues 59. Union dues 59. S 3.20.0 \$ 0.00 59. Union dues 59. S 3.30.0 \$ 0.00 EHE Insurance 59. \$ 3.30.0 \$ 0.00 EEHB 59. \$ 3.30.0 \$ 0.00 FEHB 59. \$ 3.29.40 \$ 0.00 FEHB 59. \$ 3.29.40 \$ 0.00 FEHB 59. \$ 100.00 \$ 0.00 FEHB 60. \$ 3,427.22 \$ 0.00 FEHB 60. \$ 0.00 FEH		5b.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b.	\$	0.00	\$	0.00	
Sh. Other deductions. Specify: Dental Life Insurance FEHB Sh. 000 FEHB Sh. 000 TSP FERS Sh. 000 Sh. 2000 Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. List all other income regularly received: Ba. Net income from rental property and from operating a business, profession, or farm. Altach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Ba. Interest and dividends Ba. Interest and dividends Ba. Interest and dividends that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Ba. Unemployment compensation Ba. Sh. 1000 Sh. 0.00		5e.	Insurance	5e.	\$	326.00	\$ \$	0.00	
FEHB TSP FERS 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 3,29.40 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,893.98 \$ 0.00 8. List all other income regularly received: 8a. Net income from ental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10. \$ 4,893.98 + \$ 264.33 = \$ 4,629.65 11. State all other regular contributions to the expenses that you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 12. \$ 4,629.65 Combined monthly income.		-	Other deductions. Specify: Dental		\$	95.40	+ \$	0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,893.98 \$ 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Increast and dividends 8b. \$ 0.00 \$ -264.33 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if Known) of any non-cash assistance that you receive, such as tood stamps (henefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 9 Add all other monthly income. Specify: 8f. \$ 0.00 \$ 0.00 9 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 10 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12 Do you expect an increase or decrease within the year after you file this form? 13 Do you expect an increase or decrease within the year after you file this form?			TSP FERS	_ _ _	\$	329.40	\$	0.00	
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. Specify: 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ -264.33 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income.			· · · · · · · · · · · · · · · · · · ·		Τ,	3,427.22	· 	0.00	
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8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ -264.33 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.					٠,		\$		
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9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ -264.33 = \$ 4,629.65 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?		-			٠,		· -		
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Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{4,629.65}{Combined monthly income}}\$ 13. Do you expect an increase or decrease within the year after you file this form? No.	11.	Incl othe Do	ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depend		•			0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No. monthly income	12.	Writ	te that amount on the Summary of Schedules and Statistical Summary of Certa						
	13.	Do :	• • •	1?					

Official Form B 6I Schedule I: Your Income page 2

Filli	in this informa	ation to identify yo	our case:						
Debt	tor 1	Lancelot A.	Gambie			Ch	neck if this is:		
200		Lancelot A.	Gairibis					filing	
Debt	tor 2	Patricia Gan	nbis			_		t showing post-petition chap	oter
(Spo	ouse, if filing)					_	13 expenses	as of the following date:	
Unite	ed States Bank	ruptcy Court for the	EASTE	RN DISTRICT OF NEW Y	ORK		MM / DD / YY	ΥΥ	
_		= 44000			_	_	A	' (D . b	
	e number 1 nown)	5-41236						ing for Debtor 2 because Description in Separate household	eptor
Of	fficial Fo	orm B 6J							
		J: Your	_ Evnor	1606					12/13
Be a	as complete ormation. If n	and accurate as	s possible eded, atta	. If two married people ar ch another sheet to this				ble for supplying correct vrite your name and case	12/13
Part		ribe Your House	ehold						
1.	Is this a joi								
	□ No. Go t		_						
	■ Yes. Do	es Debtor 2 live	in a separ	ate household?					
		No							
		es. Debtor 2 mu	st file a sep	parate Schedule J.					
2.	Do you hav	ve dependents?	□ No						
	Do not list Debtor 2.	Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependen age	t's Does dependent live with you?	
	Do not state	e the						□ No	
	dependents	' names.			Son		<u> </u>	■ Yes	
								□ No	
					Daughter		1	■ Yes	
								□ No	
								Pyes	
								□ No □ Yes	
3.	expenses o	penses include of people other t ad your depende		No Yes				Li Yes	
Esti exp	imate your e	a date after the	our bankr	uptcy filing date unless y				a Chapter 13 case to repo top of the form and fill in	
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			You	r expenses	
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgage	4.	\$	3,280.00	
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$	0.00	
		erty, homeowner's	s, or renter	's insurance		4b.		0.00	
	•	•		ıpkeep expenses		4c.		0.00	
	4d. Home	eowner's associa	tion or con	dominium dues		4d.	\$	0.00	
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00	

ebtor 1	Lancelot A. Gambis		4E 4400C
ebtor 2	Patricia Gambis	Case number (if known)	15-41236
1 14:11	ition		
5. Util 6a.	ities: Electricity, heat, natural gas	6a. \$	175.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	75.00
6d.	Other. Specify:	6d. \$	
	d and housekeeping supplies	7. \$	0.00
	Idcare and children's education costs	8. \$	650.00
_		· —	800.00
	thing, laundry, and dry cleaning		80.00
	sonal care products and services	10. \$	100.00
	dical and dental expenses	11. \$	150.00
	nsportation. Include gas, maintenance, bus or train fare.	12. \$	0.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	ritable contributions and religious donations	14. \$	0.00
	urance.	ιτ. ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.		
	. Life insurance	15a. \$	0.00
15b	. Health insurance	15b. \$	0.00
15c	. Vehicle insurance	15c. \$	69.00
15d	. Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
	cify:	16. \$	0.00
	allment or lease payments:	<u> </u>	
	. Car payments for Vehicle 1	17a. \$	0.00
17b	. Car payments for Vehicle 2	17b. \$	0.00
17c	Other. Specify: Wife's Student Loans	17c. \$	557.73
	. Other. Specify:	17d. \$	0.00
8. Yo u	ir payments of alimony, maintenance, and support that you did not report as	<u></u>	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$ <u> </u>	50.00
9. Oth	er payments you make to support others who do not live with you.	\$	0.00
	cify:	<u> </u>	
	er real property expenses not included in lines 4 or 5 of this form or on Sch		
	. Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	. Homeowner's association or condominium dues	20e. \$	0.00
1. O th	er: Specify:	21. +\$	0.00
2. Yo u	r monthly expenses. Add lines 4 through 21.	22. \$	5,986.73
	result is your monthly expenses.		
	culate your monthly net income.		
	. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,629.65
	. Copy your monthly expenses from line 22 above.	23b\$	5,986.73
			0,000.70
23c	. Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	-1,357.08
For 6			rease or decrease because of a